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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

None

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

None

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Signature		Initials			

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**TITLE**

Universal eyeglass attachment

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